

Sirolimus 사용 후 호전된 신장이식 환자의 비강에 발생한 편평상피암 1례

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A Case of the Squamous Cell Carcinoma in Nasal Cavity Treated with Sirolimus in a Patient with Kidney Transplantation

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There has been increased the interest on long-term complication of transplantation because of the increase the number of patients who maintain their graft for a long time. The use of target-of-rapamycin (m-TOR) inhibitors in immunosuppression-related malignancies has improved the quality of life and increased the survival in patients with solid organ transplantation. A 72-year-old male recipient of a living donor renal allograft (1998), who was immunosuppressed with cyclosporine, azathioprine, did initially well with acceptable renal function. Steroid was stopped at post-transplant 1 month due to new onset diabetes mellitus after transplantation. In 2011, the patient visit OPD for the onset of multiple inflammatory nasal polyps and it did not improved with local treatment for 3 months. Nasal polyp biopsy was performed at otolaryngology and the biopsy showed squamous cell carcinoma. Surgeons and dermatologists recommended the wide excision but patient refused surgery due to old age and cosmetic reasons. So cyclosporine was replaced by sirolimus. The size of local lesion was reduced after immunosuppressant conversion. 12 months after conversion, the lesion was disappeared in naked eye and recurrence has not been observed. In summary, a case of squamous cell carcinoma on nasal cavity in a renal transplant was treated by conversion cyclosporine to sirolimus without surgical removal. After 1 year of immunosuppression conversion, the local lesion showed good response.

Key Words: Sirolimus, 편평상피암, 신장이식
Sirolimus, SCC, Kidney transplantation

